



BRYCE YOKOMIZO
Director

LISA NUÑEZ
Chief Deputy

County of Los Angeles
DEPARTMENT OF PUBLIC SOCIAL SERVICES

12860 CROSSROADS PARKWAY SOUTH • CITY OF INDUSTRY, CALIFORNIA 91746
Tel (562) 908-8400 • Fax (562) 908-0459



Board of Supervisors
GLORIA MOLINA
First District

YVONNE B. BURKE
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

November 8, 2005

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**RECOMMENDATION TO APPROVE AMENDMENTS
TO THE CAL-LEARN CASE MANAGEMENT SERVICES AGREEMENTS
WITH THE ADOLESCENT FAMILY LIFE PROGRAM AGENCIES
TO EXTEND THE AGREEMENTS ON A MONTH-TO-MONTH BASIS
NOT TO EXCEED THREE MONTHS
(ALL DISTRICTS - 3 VOTES)**

IT IS RECOMMENDED THAT YOUR BOARD:

Approve and instruct the Chair to sign the enclosed Amendments to the Cal-Learn Case Management Services Agreements with the four Adolescent Family Life Program (AFLP) agencies; AltaMed Health Services Corporation, Childrens Hospital Los Angeles, El Nido Family Centers, and Foothill Family Service. The Amendments extend the Agreements on a month-to-month basis not to exceed three months effective December 1, 2005, or one day after Board approval, whichever is later.

The cost of the month-to-month contract extensions is within the estimated three-year contract costs for the Agreements totaling \$21,027,719 for the period August 1, 2003 through November 30, 2006 and \$7,009,240 annually. Funding for these contracts is included in the CalWORKs Single Allocation for FY 2005-06 and there is no additional net County cost since the CalWORKs Maintenance of Effort requirement will be met.

PURPOSE/JUSTIFICATION OF RECOMMENDATION ACTION

Cal-Learn is a State-mandated program for CalWORKs participants who are under 19 years old, are pregnant or parenting, and have not yet completed their high school education. The County's Cal-Learn contractors provide comprehensive, intensive case management to assist teens in completing their high school education.

In December 2003, your Board mandated that the Cal-Learn contractors meet three performance measures, school enrollment (60%), report card submission (50%) and graduation rate (50%). To track their performance, the contractors had to enhance their current tracking system to enable them to provide data to DPSS. The system enhancement together with the added administrative workload required for the Cal-Learn case managers to document participants' progress, has resulted in increased costs to the contractors. The contractors have reported that they are currently operating at a deficit because their cost of doing business is not commensurate with the existing reimbursement rate.

These contracts are fee-for-service contracts with no maximum contract amount because they are caseload driven. In other words, payment is based on the number of eligible teens who are enrolled and participate in the Cal-Learn program.

For the past six years, the firm-fixed fee of \$160.91 per case for Cal-Learn case management services in Los Angeles County has remained unchanged. The new rate to be negotiated with the contractors will allow them to be reimbursed for work performed.

Once negotiations are completed, DPSS will submit for Board approval, amendments to extend the contracts through November 30, 2006 and include the new per case rate. In addition, to support the recommendation to extend the contracts for another year, the Department will provide the results of the contractors' performance outcomes for the past year.

Implementation of Strategic Plan Goals

The Amendments are consistent with the principles of the Countywide Strategic Plan Goal #3 (Organizational Effectiveness) to ensure that service delivery systems are efficient, effective and goal-oriented; Goal #4 (Fiscal Responsibility) to strengthen the County's fiscal capacity; and Goal #5 (Children and Families' Well-Being) to improve the well-being of children and families in Los Angeles County as measured by the achievements in the five outcome areas adopted by the Board: good health; economic well-being; safety and survival; social and emotional well-being; and educational/workforce readiness.

FISCAL IMPACT/FINANCING

These Agreements are not subject to contract maximums. The estimated costs may increase or decrease based solely upon caseload fluctuation. The cost of the month-to-month contract extensions is within the estimated three-year contract costs for the Agreements totaling \$21,027,719 for the period August 1, 2003 through November 30, 2006 and \$7,009,240 annually. Funding for these contracts is included in the CalWORKs Single Allocation for FY 2005-06 and there is no additional net County cost since the CalWORKs Maintenance of Effort requirement will be met.

The Chief Administrative Office and the Auditor-Controller have reviewed this provision and concur with our assessment.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The Amendments to extend the four Agreements on a month-to-month basis, not to exceed three months, will commence November 30, 2005, or one day after Board approval, whichever is later.

The County is authorized to provide these services under California's Welfare and Institutions Code, Section 11331 through 11334 and California Department of Social Services' (CDSS) Manual of Policies and Procedures (MPP), Chapter 42-762 through 42-769, and the COUNTY's Cal-Learn Plan.

The agencies have provided satisfactory services to the County for the past eight years and have been active partners in the administration of these services. The proposed Agreements will continue to foster effective partnerships with the County's community-based organizations.

The award of these Amendments will not result in unauthorized disclosure of confidential information and will be in full compliance with federal, State, and County regulations.

The County may terminate the Agreements with a 30 calendar day prior written notice.

The contractors will not be asked to perform services which will exceed the Agreements' rates, scope of work, and agreement term.

CONTRACTING PROCESS

State law requires that counties contract with the AFLP agencies to provide intensive case management services. Thus, these Agreements were not the result of a competitive solicitation but rather procurements by negotiations.

Since the current contracts do not include a provision to extend the contracts on a month-to-month basis, contract amendments are required pursuant to Board approval.

IMPACT ON CURRENT SERVICES

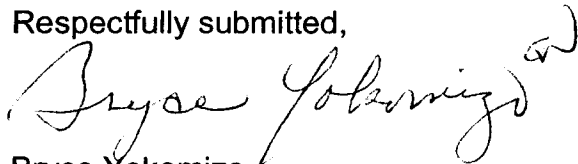
The execution of these Amendments will not infringe on the role of the County in its relationship to its residents, and the County's ability to respond to emergencies will not be impaired. There is no change in risk exposure to the County. This Amendment will not affect the current services being provided under this agreement.

The award of these Amendments will enable the Department to continue providing Cal-Learn case management services to the County's eligible pregnant and parenting teenagers.

CONCLUSION

The Executive Officer, Board of Supervisors, is requested to return one (1) adopted stamped Board Letter and three (3) original signed copies of each amendment to the Director of DPSS.

Respectfully submitted,

A handwritten signature in cursive script, reading "Bryce Yokomizo", followed by a small circular mark.

Bryce Yokomizo
Director

BY:ab

Enclosures

c: Auditor-Controller
Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

**AMENDMENT NUMBER FIVE TO THE AGREEMENT WITH
ALTAMED HEALTH SERVICES CORPORATION FOR THE PROVISION OF
CAL-LEARN CASE MANAGEMENT SERVICES**

Reference is made to the document entitled "Cal-Learn Case Management Services Contract By and Between the County of Los Angeles and AltaMed Health Services Corporation," dated August 12, 2003, and further identified as County Agreement Number 74590, Amendment Number One, dated September 29, 2003, Amendment Number Two, dated November 25, 2003, Amendment Number Three, dated November 30, 2004, Amendment Number Four, dated October 25, 2005, Change Notice Number One, dated October 23, 2003, and Change Notice Number Two, dated June 10, 2004, hereinafter referred to as "Agreement."

Effective November 30, 2005 or one day after Board approval, whichever is later, the Agreement is amended as follows:

1. **SECTION II, TERM OF AGREEMENT**, Paragraph 1.3 is added as follows:
 - 1.3 This Agreement is extended on a month-to-month basis, not to exceed three months, commencing December 1, 2005 through February 28, 2006.
2. **SECTION IV, CONTRACT RATES**, Subparagraph 1.1.2 is added as follows:
 - 1.1.1 Attachment B-5, Contractor's Budget is added as an attachment hereto, effective December 1, 2005, on a month-to-month basis through February 28, 2006.

All other terms and conditions of the Agreement remain in full force and effect.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the Chair, and the seal of said Board hereto affixed and attested by the Executive Officer and Clerk thereof, and CONTRACTOR has caused this Amendment to be signed by its duly authorized officer(s), this _____ day of _____ 2005.

COUNTY OF LOS ANGELES

By _____
Chair, Board of Supervisors

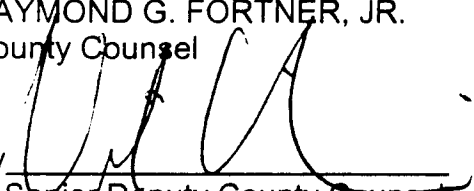
Attest:

VIOLET VARONA-LUKENS, Executive Officer
Clerk of the Board of Supervisors
of the County of Los Angeles

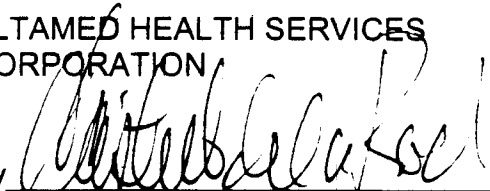
By _____
Deputy

APPROVED AS TO FORM:

RAYMOND G. FORTNER, JR.
County Counsel

By 
Senior Deputy County Counsel

ALTAMED HEALTH SERVICES
CORPORATION

By 
Castulo de la Rocha, President & CEO
500 Citadel Drive, Suite 490
Los Angeles, California 90040

ATTACHMENT B-5
CONTRACTOR'S BUDGET

CONTRACT BUDGET

PROJECT NAME: Cal-Learn

CONTRACTOR: AltaMed Health Services Corp.

CONTRACT PERIOD: 12/1/05 - 02/28/06

CONTACT PERSON:

TELEPHONE NUMBER:

Paul Tropea

323-889-7352

ADMINISTRATIVE COSTS:

DIRECT COSTS

Salaries & Benefits (See Personnel Schedule)

Total Cost

Case Management/Administrative Staff:

Salaries	\$	178,297.86
Fringe Benefits	\$	49,923.40
Personnel Subtotal	\$	228,221.26

OPERATING COSTS (1)

	Monthly Cost	Cost
Equipment *	\$14,670	\$14,670
Supplies	\$3,400	3,400
Mileage (approx. 26,000 miles @ .34.5 cents/mile)	\$2,235	2,235
Computers & Software	\$1,554	1,554
Printing/Postage	\$818	818
Training/Staff Dev./Health Promo/Education	\$1,957	1,957
Depreciation/Building Interest	\$6,825	6,825
Utilities	\$3,275	3,275
Telephones	\$4,556	4,556
Facility Maintenance	\$1,500	1,500
Other (Ins.Gen., interest, fees/licenses, property taxes) *	\$3,795	3,795
Operating Costs - Subtotal	\$ 44,584.25	\$ 44,584.25

INDIRECT COSTS (List all appropriate)

(17.15% of Total Personnel Cost including Fringe Benefits)

	39,140	39,139.95
Indirect Cost - Subtotal	\$39,140	\$ 39,139.95
Total Administrative Cost		\$ 311,945.46

DIRECT SERVICES COSTS:

DIRECT SERVICES

Type of Service caseload multiplied by cost per case (Sub-contracting)

Grand Total Contract Cost

\$	-
\$	311,945.46

Footnotes:

(1) All Operating costs must be reasonable and prorated by the percentage of uses in serving CalWORKs participants if costs includes other programs cost.

(2) DPSS prior approval is required for purchases of any Information Technology (IT) equipment. Attach EDP Equipment Schedule.

* Please see Itemized Schedule

Note Budget represents actual expenditures that AltaMed will incur to run the Cal-Learn program. Deficit (variance) from expenditures to revenue (at \$160.91 per participant) will be subsidized by AltaMed.

PERSONNEL SCHEDULE

CONTRACTOR: AllMed Health Services Corp.
CONTRACT PERIOD: 12/1/05 - 02/28/06

CONTACT PERSON:
TELEPHONE NUMBER:

Anita Butler
(323) 278-4245

PERSONNEL SALARIES (1)	POSITION CLASSIFICATION	NO OF POSITIONS	MONTHLY/YHRLY SALARY	% TIME ALLOCATION	TOTAL MONTHLY COST	TOTAL ANNUAL COST	TERM OF CONTRACT	TOTAL COST
Filed	Program Director		\$37.50	35%	\$ 2,275.00	\$ 27,300.00	1	\$27,300.00
Filed	Program Manager		\$30.43	45%	2,373.54	\$ 28,482.48	1	\$28,482.48
Filed	Program Coordinator		\$24.65	100%	4,272.67	\$ 51,272.00	1	\$51,272.00
Filed	Exec Admin Asst.		\$17.16	35%	1,041.04	\$ 12,492.48	1	\$12,492.48
Filed	Admin. Asst. - Front		\$14.56	30%	757.12	\$ 9,085.44	1	\$9,085.44
Filed	Admin. Asst. - Back		\$15.60	30%	811.20	\$ 9,734.40	1	\$9,734.40
Filed	Data Entry		\$16.12	100%	2,794.13	\$ 33,529.60	1	\$33,530.00
Open	LCSW/MFT		\$30.00	30%	1,560.00	\$ 18,720.00	1	\$18,720.00
Filed	Maintenance		\$10.10	48%	840.32	\$ 10,083.84	1	\$10,084.00
Filed	Outreach Worker		\$15.20	50%	1,317.33	\$ 15,808.00	1	\$15,808.00
Filed	Program Assistant		\$20.50	100%	3,553.33	\$ 42,640.00	1	\$42,640.00
Filed (LV)	Case Manager		\$15.60	100%	2,704.00	\$ 32,448.00	1	\$32,448.00
Filed (RL)	Case Manager		\$17.56	100%	3,043.73	\$ 36,524.80	1	\$36,525.00
Filed (TMC/L)	Case Manager		\$17.56	100%	3,043.73	\$ 36,524.80	1	\$36,525.00
Filed (CN)	Case Manager		\$19.51	100%	3,381.73	\$ 40,580.80	1	\$40,581.00
Filed (MVH)	Case Manager		\$20.05	100%	3,475.33	\$ 41,704.00	1	\$41,704.00
Filed (NM)	Case Manager		\$18.21	100%	3,156.40	\$ 37,876.80	1	\$37,877.00
Filed (NJO)	Case Manager		\$15.60	100%	2,704.00	\$ 32,448.00	1	\$32,448.00
Filed (AM)	Case Manager		\$15.60	100%	2,704.00	\$ 32,448.00	1	\$32,448.00
Filed (LM)	Case Manager		\$15.60	100%	2,704.00	\$ 32,448.00	1	\$32,448.00
Open	Open		\$17.00	100%	2,946.67	\$ 35,360.00	1	\$35,360.00
Open	Case Manager		\$16.00	100%	2,773.33	\$ 33,280.00	1	\$33,280.00
Open	Case Manager		\$15.00	100%	2,600.00	\$ 31,200.00	1	\$31,200.00
Open	Case Manager		\$15.00	100%	2,600.00	\$ 31,200.00	1	\$31,200.00
				Total Salaries:	\$ 59,432.62	\$ 713,191.44		\$713,191.44

EMPLOYEE BENEFITS BY CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	TOTAL
Health Plan (2)	\$57,055 32					\$57,055
Dental Plan						\$0
Retirement	\$28,527 66					\$28,528
SUI						\$0
Social Security	\$57,055 32					\$57,055
Worker's Compensation	\$49,923 40					\$49,923
Long Term Disability						\$0
Holidays						\$0
Sick Leave						\$0
Vacation						\$0
Life Insurance						\$0
Fringe Benefits per Classification	\$7,131 91					\$7,132
Fringe Benefit Subtotal	\$199,693 60	\$0.00	\$0.00	\$0.00	\$0.00	\$199,694
Total # of Positions by Classification						1
Total Fringe Benefits (3):	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$199,694

Footnotes

- (1) Contributions must be in compliance with the County's *County Ordinance*
- (2) *Include a Certificate Plan*
- (3) *Provide Beneficial Substances per Usable Area's number of patches*
- (4) *Change the current heading to the name of the patches and provide beneficial information for that patches*

DIRECT SERVICE PROVIDER BUDGET

PROJECT NAME:	Cal-Learn	CONTACT PERSON:	Anita Butler
CONTRACTOR:	AltaMed Health Services Corp.	TELEPHONE NUMBER:	(323) 278-4245
CONTRACT PERIOD:	12/1/05 - 02/28/06		

DIRECT SERVICES (1)

LIST TYPES OF SERVICE:	ESTIMATED CASELOAD	COST PER CASE	TOTAL COST
1 Case Management	5,595	160.91	\$ 900,291.45
2			\$ -
3			\$ -
4			\$ -
5			\$ -
6			\$ -
7			\$ -
8			\$ -
9			\$ -
10			\$ -
11			\$ -
12			\$ -
13			\$ -
14			\$ -
15			\$ -
16			\$ -
17			\$ -
18			\$ -
19			\$ -
20			\$ -
21			\$ -
Total Direct Services Cost			\$ 900,291.45

Footnote:

(1) Contractors are required to complete a budget narrative for each separate line item in their budget. All figures and computations must be clearly explained.

(Project name, Project #)

Department or Agency AltaMed Health Services Corp.
Contact Person Anita Butler
Phone No. 323-278-4245

Fiscal Year: _____
MOU Date: _____
Contract # _____

EDP EQUIPMENT SCHEDULE

Item #	Description	Quantity	Unit Cost	Total Cost
271687-BTO	Compaq EVO Convertible Minitower	3	\$991.20	\$2,973.60
261611-003	Compaq V7550 Color CRT Monitors	3	\$148.05	\$444.15
	ImageInstall	3	\$31.50	\$94.50
	Tax (8.25%)		\$275.96	\$289.76
	Novell Netware Licensing	3	\$83.50	\$250.49
	Groupwise (e-mail) Licensing	3	\$271.95	\$815.85
	WordPerfect Licensing	3	\$227.85	\$683.55
	Lotus 123 Licensing	3	\$203.70	\$611.10
	Antivirus Software	3	\$17.67	\$53.01
GRAND TOTAL				\$6,216.01

DPSS Review / Approval *(circle one)*:

Name: _____
Division/Section _____

Title: _____
Date: _____

Justification Submitted Yes No

- OMB Circular A-87 provides that the cost of equipment must "be reasonable and necessary for proper and efficient performance and administration of the project."
- No EDP equipment over \$5,000 per item.

(Project Name, Project #)

Fiscal Year: _____

EDP EQUIPMENT SCHEDULE

JUSTIFICATION

Computers are needed to replace outdated technology and for new case managers. Three computers will be shared by four open Case Manager positions.

Prepared by: _____

Phone No. _____

EMPLOYEE BENEFITS

CONTRACTORAltaMed Health Services Corp.**CONTRACT PERIOD:** **Position Classification**All**Medical Insurance/Health Plan (1)**

Employer Pays 100% HMO and up to
\$150/mo for PPO Plans.
Annual Deductible:

Employee Pays \$ Total Premium Employee \$ Family \$

Coverage (check all applicable):

☒
☒
☒
☒
☒
☒
☒
☒
☒

Hospital Care : Inpatient

\$ Outpatient\$

X-Ray & Laboratory

Surgery

Office Visits

Pharmacy

Maternity

Mental Health/Chemical Dependency, Inpatient

Mental Health/Chemical Dependency, Outpatient

Dental InsuranceEmployer Pays 100%Employee Pays \$ Total Premium \$0**Life Insurance**Employer Pays 100%Employee Pays \$ Total Premium \$0**Vacation**Number of Days:

10 , And

Any Increase After

3 Years of Employment, Number of Days or Hours

5 days**Sick Leave**Number of Days:

6 days

, Per Year, And

Any Increase or Accumulation, Number of Days or Hours **Holidays**Number of Days:

10 , Per Year

Retirement

Employer Pays 403B plan matches up to
4% of employee contribution.

Employee Pays \$ Total **Footnote:**(1) indicate if Cafeteria Plan and amount per employee

Cal-Learn Budget Justification Narrative

CONTRACTOR: AltaMed Health Services Corp.
 CONTRACT PERIOD: 12/1/05 - 02/28/06

CONTACT PERSON:
 TELEPHONE NUMBER:

Paul Tropea
323-889-7352

ADMINISTRATIVE COSTS:

DIRECT COSTS

	<u>FTEs</u>	<u>Total Cost</u>
Salaries & Benefits		
<u>Case Management/Administrative Staff:</u>		
Case Manager (13): Conducts assessment, care plan development, coordination and monitoring of services to teen clients.	100%	\$454,043
Program Manager: Supervises Case Supervisors, closely works with Director to oversee daily program operations and the implementation of program goals and contract compliance.	100%	\$51,272
Program Coordinator: Supervises Case Managers, participates in case conferences and provides consultation to maximize case manager intervention with clients.	45%	\$28,482
LCSW/MFT: Provides short term psychosocial counseling services to clients, training and crisis intervention to facilitate the delivery of case management services.	30%	\$18,720
Outreach: Recruits potential program clients and provides service referrals if teen is ineligible for program.	50%	\$15,808
Program Director: Responsible for the program overall operations, completes all required reports and ensures contract compliance.	35%	\$27,300
Data Entry: Enters all Lodestar and GEARS systems data.	100%	\$33,530
Exec./Admin Assistant: Assists Director and Coordinator with typing, office management, coordination of meetings and other administrative duties.	95%	\$31,312
Program Assistant: Serves as team leader in the absence of Coordinator. Assists Coord. In admin tasks. Carries a small case load.	100%	\$42,640
Maintenance: Provides janitorial services to maintain clean work environment.	48%	\$10,084
Total Personnel		\$713,191
<u>Fringe Benefits:</u>	<u>Percentage</u>	
Health Plan	8.0%	\$57,055
Retirement	4.0%	\$28,528
Social Security	8.0%	\$57,055
Workers Compensation	7.0%	\$49,923
Fringe Benefits	1.0%	\$7,132
Total Fringe Benefits	28.0%	\$199,694
Total Personnel		\$912,885

OPERATING COSTS (1)**Yearly Cost****Equipment:**

Photocopy Machines Rental	\$33,480 per year	
Equipment Repair & Maintenance	\$1,200 per year	
Depreciation F& E	\$24,000 per year	
Total Equipment		\$58,680

Supplies:

Approx. \$1,135/mo. for Office/Facility/Other/Client Food supplies		\$3,400
--	--	----------------

Mileage:

Approximately 26,000 miles @ 34.5 cents/mile)		\$2,235
---	--	----------------

EDP Equipment:

Please see EDP Equipment and Justification schedules for detail		\$1,554
---	--	----------------

Printing/Postage:

Approximately \$273 per month for postage and printing materials		\$818
--	--	--------------

Provider Training/Staff Devel./Health Promo/Education:

Approx. \$652 per month for Training/Staff Devel./ Health promotion/education materials		\$1,957
---	--	----------------

Depreciation/Building Interest:

Depreciation- Building; approximately \$2,000 per month for MP building depreciation		\$24,000
Interest - Building; approximately \$275 per month for MP building interest		\$3,300

Utilities:

Approximately \$1,092 per month for utilities expenses		\$3,275
--	--	----------------

Telephones:

Approximately \$1,520 per month for telephone services		\$4,556
--	--	----------------

Facility Maintenance:

Approximately \$500 per month for facility maintenance		\$1,500
--	--	----------------

Other:

Insurance-General at \$950 per month	\$11,400 per year	
Interest Expense at \$15 per month	\$180 per year	
Fees/Licenses/Property Taxes at \$300 per month	\$3,600 per year	
Total Other		\$15,180

Operating Costs - Subtotal		\$120,454
-----------------------------------	--	------------------

INDIRECT COSTS (List all appropriate)

(17.15% of Total Personnel Costs including Fringe Benefits)		\$39,140
---	--	-----------------

Total Administrative Cost**\$1,072,479****Grand Total Contract Cost****\$1,072,479**

AltaMed Health Services Corporation
Cal-Learn Budget
12/1/05 - 02/28/06
Operating Cost Itemization

	<u>Monthly Cost</u>	<u>Yearly Cost</u>
<u>Equipment:</u>		
Photocopy Machines Rental	\$2,790	\$33,480
Equipment Repair & Maintenance	\$100	\$1,200
Depreciation F&E	\$2,000	\$24,000
Total Equipment	<u>\$4,890</u>	<u>\$58,680</u>
<u>Other:</u>		
Insurance-General	\$950	\$11,400
Interest Expense	\$15	\$180
Fees/Licenses/Penalties	\$300	\$3,600
Total Other	<u>\$1,265</u>	<u>\$15,180</u>

**AMENDMENT NUMBER FOUR TO THE AGREEMENT WITH
CHILDRENS HOSPITAL LOS ANGELES FOR THE PROVISION OF
CAL-LEARN CASE MANAGEMENT SERVICES**

Reference is made to the document entitled "Cal-Learn Case Management Services Contract By and Between the County of Los Angeles and Childrens Hospital Los Angeles," dated August 12, 2003, and further identified as County Agreement Number CMMD-066, Amendment Number One, dated September 30, 2003, Amendment Number Two, dated November 25, 2003, Amendment Number Three, dated November 30, 2004, Change Notice Number One, dated October 23, 2003, and Change Notice Number Two, dated May 21, 2004, hereinafter referred to as "Agreement."

Effective November 30, 2005 or one day after Board approval, whichever is later, the Agreement is amended as follows:

1. SECTION II, TERM OF AGREEMENT, Paragraph 1.3 is added as follows:

1.3 This Agreement is extended on a month-to-month basis, not to exceed three months, commencing December 1, 2005 through February 28, 2006.

2. SECTION IV, CONTRACT RATES, Subparagraph 1.1.2 is added as follows:

1.1.1 Attachment B-5, Contractor's Budget is added as an attachment hereto, effective December 1, 2005, on a month-to-month basis through February 28, 2006.

All other terms and conditions of the Agreement remain in full force and effect.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the Chair, and the seal of said Board hereto affixed and attested by the Executive Officer and Clerk thereof, and CONTRACTOR has caused this Amendment to be signed by its duly authorized officer(s), this ~~24th~~ day of ~~October~~ 2005.

COUNTY OF LOS ANGELES

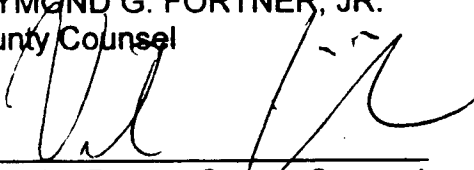
By _____
Chair, Board of Supervisors

Attest:


VIOLET VARONA-LUKENS, Executive Officer
Clerk of the Board of Supervisors
of the County of Los Angeles

By _____
Deputy

APPROVED AS TO FORM:

RAYMOND G. FORTNER, JR.
County Counsel
By  _____
Senior Deputy County Counsel

CHILDRENS HOSPITAL LOS ANGELES

By  _____
Sylvester "Sac" Carreathers
Administrative Director
P.O. Box 54700, Mailstop #84
Los Angeles, California 90054

ATTACHMENT B-4
CONTRACTOR'S BUDGET

LINE ITEM BUDGET

PROJECT NAME: PROJECT NATEEN

CONTRACTOR: CHILDRENS HOSPITAL LOS ANGELES
 CONTRACT PERIOD: 12/1/05-2/28/06
 FISCAL YEAR: 2005/2006

CONTACT PERSON: Priscilla Brown
 TELEPHONE NUMBER: (323) 669-2353
 E-MAIL: pbrown@chla.usc.edu

ADMINISTRATIVE COSTS:

DIRECT COSTS

Administrative Staff:

Salaries	\$	45,670
Fringe Benefits	\$	9,134
Total	\$	54,803

Case Management:

Salaries	\$	83,100
Fringe Benefits	\$	16,620
Total	\$	99,720

Personnel Subtotal	\$	154,523
---------------------------	-----------	----------------

OPERATING COSTS

	<u>Monthly Cost</u>	<u>Cost for 3 Months</u>
Equipment	\$0	\$0
Supplies	\$378	\$ 1,134
Mileage (\$.375 per mile x estimated mileage)	\$619	\$ 1,856
Printing	\$100	\$ 300
Provider Training	\$292	\$ 875
Telephones	\$350	\$ 1,050
Other (must be itemized)		
Lease/Rental-Space	\$6,162	\$ 18,485
Utilities	\$750	\$ 2,250
Postage	\$100	\$ 300
Consultant	\$200	\$ 600
Health Education	\$167	\$ 500
Client Support	\$583	\$ 1,750
Guest Speakers	\$208	\$ 625
Graduation Ceremony	\$292	\$ 875
 Operating Costs - Subtotal	 \$10,200	 \$ 30,600

INDIRECT COSTS (List all appropriate)

(10% of Personnel Salaries *. See Personnel Schedule)

	<u>Percentage</u>	<u>Yearly Cost</u>
Indirect Cost - Subtotal	10%	\$ 12,877
Total Administrative Cost		\$ 12,877

DIRECT SERVICES COSTS:

DIRECT SERVICES

Grand Total Contract Cost	\$	198,000
----------------------------------	-----------	----------------

Footnote:

May not apply to agencies with an approved indirect cost rate proposal. The approved proposal letter should be attached to the budget.
 All costs must be necessary, reasonable and justifiable. The costs should be prorated by the percentage of uses in serving CalWORKs participants if costs include other programs.
 The budget should be accompanied with budget narrative.

PERSONNEL SCHEDULE

CONTRACTOR: PROJECT NATEEN
 CONTRACT PERIOD: 12/1/05-2/28/06
 FISCAL YEAR: 2005/2006

CONTACT PERSON: Priscilla Brown
 TELEPHONE NUMBER: (323) 669-2353

Section I

PERSONNEL SALARIES (2)	POSITION CLASSIFICATION	NUMBER OF POSITIONS	MONTHLY/ HOURLY SALARY	% TIME ALLOCATION	TOTAL MONTHLY COST	TOTAL COST FOR 3 MONTHS
	Division Administrator	1	\$ 9,012	5.0%	\$ 450.62	\$ 1,351.85
	Manager, NATEEN Program	1	\$ 5,399	50.0%	\$ 2,699.67	\$ 8,099.00
	Clinical Social Worker II	1	\$ 5,015	50.0%	\$ 2,507.50	\$ 7,522.50
	Clinical Social Worker II	1	\$ 5,015	40.0%	\$ 2,006.00	\$ 6,018.00
	Case Manager	1	\$ 2,863	100.0%	\$ 2,863.00	\$ 8,589.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Case Manager	1	\$ 3,009	100.0%	\$ 3,009.00	\$ 9,027.00
	Case Manager	1	\$ 2,751	100.0%	\$ 2,751.00	\$ 8,253.00
	Case Manager	1	\$ 2,751	100.0%	\$ 2,751.00	\$ 8,253.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Case Manager	1	\$ 2,721	100.0%	\$ 2,721.00	\$ 8,163.00
	Staff Secretary	1	\$ 2,621	40.0%	\$ 1,048.40	\$ 3,145.20
	Project Assistant I	1	\$ 2,671	100.0%	\$ 2,671.00	\$ 8,013.00
	Project Assistant I	1	\$ 2,671	40.0%	\$ 1,068.40	\$ 3,205.20
	Staff Secretary	1	\$ 3,456	60.0%	\$ 2,073.60	\$ 6,220.80
	Fiscal Specialist	1	\$ 6,980	10.0%	\$ 698.00	\$ 2,094.00
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Total Salaries:					\$ 42,923.18	\$ 128,769.55

Section II

EMPLOYEE BENEFITS BY CLASSIFICATION		ALL STAFF POSITIONS				(5)	TOTAL
Health Plan (3)	6.44%	\$8,292.76					\$8,293
Dental Plan							\$0
Retirement	3.07%	\$3,953.23					\$3,953
SUI	0.25%	\$321.92					\$322
Social Security	7.65%	\$9,850.87					\$9,851
Worker's Compensation	2.59%	\$3,335.13					\$3,335
Long-Term Disability							\$0
Holidays							\$0
Sick Leave							\$0
Vacation							\$0
Life Insurance							\$0
Fringe Benefits per Classification							\$0
Fringe Benefit Subtotal	20.00%	\$25,753.91	\$0.00	\$0.00	\$0.00	\$0.00	\$25,754
Total # of Positions by Classification							
Total Fringe Benefits (4):		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25,754

Footnotes:

- (1) Annual Year is Fiscal Year
- (2) Contractors must be in compliance with the County's Living Wage Ordinance.
- (3) Indicate if Cafeteria Plan
- (4) Fringe Benefits Subtotal per Classification x number of position
- (5) Change the column heading to the name of the position and provide benefit information for that position

**AMENDMENT NUMBER FIVE TO THE AGREEMENT WITH
EL NIDO FAMILY CENTERS FOR THE PROVISION OF
CAL-LEARN CASE MANAGEMENT SERVICES**

Reference is made to the document entitled "Cal-Learn Case Management Services Contract By and Between the County of Los Angeles and El Nido Family Centers," dated August 12, 2003, and further identified as County Agreement Number 74591, Amendment Number One, dated September 29, 2003, Amendment Number Two, dated November 25, 2003, Amendment Number Three, dated November 30, 2004, Change Notice Number One, dated November 17, 2003, and Change Notice Number Two, dated May 25, 2004, hereinafter referred to as "Agreement."

Effective November 30, 2005 or one day after Board approval, whichever is later, the Agreement is amended as follows:

1. SECTION II, TERM OF AGREEMENT, Paragraph 1.3 is added as follows:

1.3 This Agreement is extended on a month-to-month basis, not to exceed three months, commencing December 1, 2005 through February 28, 2006.

2. SECTION IV, CONTRACT RATES, Subparagraph 1.1.2 is added as follows:

1.1.1 Attachment B-5, Contractor's Budget is added as an attachment hereto, effective December 1, 2005, on a month-to-month basis through February 28, 2006.

All other terms and conditions of the Agreement remain in full force and effect.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the Chair, and the seal of said Board hereto affixed and attested by the Executive Officer and Clerk thereof, and CONTRACTOR has caused this Amendment to be signed by its duly authorized officer(s), this _____ day of _____ 2005.

COUNTY OF LOS ANGELES

By _____
Chair, Board of Supervisors

Attest:

VIOLET VARONA-LUKENS, Executive Officer
Clerk of the Board of Supervisors
of the County of Los Angeles

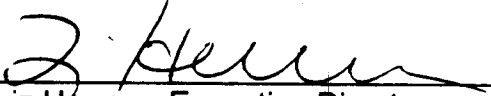
By _____
Deputy

APPROVED AS TO FORM:

RAYMOND G. FORTNER, JR.
County Counsel

By 
Senior Deputy County Counsel

EL NIDO FAMILY CENTERS

By 
Liz Herrera, Executive Director
10200 Sepulveda Blvd., Suite 350
Mission Hills, CA 91345

ATTACHMENT B-5
CONTRACTOR'S BUDGET

CONTRACT BUDGETPROJECT NAME: Cal-LearnCONTRACTOR: EL NIDO FAMILY CENTERSCONTACT PERSON: Liz HerreraCONTRACT PERIOD: 12/01/05 - 2/28/06TELEPHONE NUMBER: (818) 830-3640**ADMINISTRATIVE COSTS:****DIRECT COSTS****Salaries & Benefits (See Personnel Schedule)****Total Cost****Case Management/Administrative Staff:**

Salaries	\$	319,980
Fringe Benefits	\$	93,646
Personnel Subtotal	\$	413,626

OPERATING COSTS (1)**Monthly Cost****Yearly Cost**

Equipment *	\$0	\$0
Supplies	\$2,950	\$8,850
Mileage (\$.40/ mile x 8500miles/mo.)	\$3,400	\$10,200
Computers, Printer & Software (2)	\$0	\$0
Printing/Postage	\$1,250	\$3,750
Provider Training/Health Promo/Education	\$500	\$1,500
Rent	\$10,235	\$30,705
Utilities	\$1,500	\$4,500
Telephones , Cell Phone, Pagers & Internet	\$3,000	\$9,000
Facility /Maintenance	\$1,308	\$3,924
Other (See Attachment II for details)	\$3,300	\$9,900
Operating Costs - Subtotal	\$27,443	\$82,329

INDIRECT COSTS (List all appropriate)

(10.81% of TOTAL PERSONNEL COSTS (\$44,703 / \$413,626))

Indirect Cost - Subtotal	\$14,901	\$ 44,703
Total Administrative Cost		\$ 540,658

DIRECT SERVICES COSTS:**DIRECT SERVICES**

Type of Service caseload multiplied by cost per case (Sub-contracting)

\$ -

Grand Total Contract Cost**\$ 540,658****Footnotes:**

- (1) All Operating costs must be reasonable and prorated by the percentage of uses in serving CalWORKs participants if costs includes other programs cost.
- (2) DPSS prior approval is required for purchases of any Information Technology (IT) equipment. Attach EDP Equipment Schedule.

CONTRACTOR:
CONTRACT PERIOD:

EL NIDO FAMILY CENTERS
12/01/05 - 2/28/06

CONTACT PERSON:
TELEPHONE NUMBER:

Liz Herrera
(818) 830-3640

Other Operating Costs

	<u>Monthly Cost</u>	<u>Yearly Cost</u>
Audit & Accounting	\$ -	\$ -
Employee Recruitment & Advertising	\$ -	\$ -
Office Equipment Maintenance, Lease & Rental	\$ 1,650	\$ 4,950
Property Tax	\$ -	\$ -
Property & Liability Insurance	\$ 1,650	\$ 4,950
Office Maintenance	\$ -	\$ -
Bank & Payroll Services Fees	\$ -	\$ -
Van Operating costs, maintenance & repairs	\$ -	\$ -
Miscellaneous expenses	\$ -	\$ -
Operating Costs - Subtotal	\$ 3,300	\$ 9,900

PERSONNEL SCHEDULE

CONTRACTOR: EL NIDO FAMILY CENTERS
CONTRACT PERIOD: 12/01/05 - 2/28/06

CONTACT PERSON: Liz Herrera
TELEPHONE NUMBER: (818) 830-3640

PERSONNEL SALARIES (1)	POSITION CLASSIFICATION	NO OF POSITIONS	MONTHLY/HRLY SALARY	% TIME ALLOCATION	TOTAL MONTHLY COST	TOTAL ANNUAL COST	TERM OF CONTRACT	TOTAL COST
SEE ATTACHMENT I								
Total Salaries:					\$ 106,660.00	\$ 319,980.00		\$319,980

EMPLOYEE BENEFITS BY CLASSIFICATION	ALL POSITION CLASSIFICATION					TOTAL
Health Plan (2)	16,444					
Dental Plan	194					
Retirement	21,600					
SUI	14,030					
Social Security	24,478					
Worker's Compensation	13,255					
Long Term Disability	1,688					
Life Insurance	1,597					
Employee Assistant Program	360					
Fringe Benefit Subtotal	93,646	\$0.00	\$0.00	\$0.00	\$0.00	\$93,646
Total # of Positions by Classification						
Total Fringe Benefits (3):	93,646	\$0.00	\$0.00	\$0.00	\$0.00	\$93,646

Footnotes:

- (1) Contractors must be in compliance with the County's Living Wage Ordinance.
- (2) Indicate if Cafeteria Plan.
- (3) Fringe Benefits Subtotal per Classification x number of position.
- (4) Change the column heading to the name of the position and provide benefit information for that position.

EL NIDO FAMILY CENTERS
12/01/05 - 2/28/06

Liz Herrera
(818) 830-3640

POSITION CLASSIFICATION	NO OF POSITIONS	MONTHLY/HRLY SALARY	% TIME ALLOCATION	TOTAL MONTHLY COST	TOTAL ANNUAL COST	TERM OF CONTRACT	TOTAL COST
Program Director	1	\$ 4,936	17.00%	\$ 839	\$ 2,517	"	\$ 2,517
Program Director	1	\$ 5,322	46.00%	\$ 2,448	\$ 7,344	"	\$ 7,344
Program Director	1	\$ 4,550	39.50%	\$ 1,797	\$ 5,391	"	\$ 5,391
Program Analyst	1	\$ 4,292	70.00%	\$ 3,004	\$ 9,012	"	\$ 9,012
Supervisor	1	\$ 3,501	20.00%	\$ 700	\$ 2,100	"	\$ 2,100
Supervisor	1	\$ 3,262	100.00%	\$ 3,262	\$ 9,786	"	\$ 9,786
Supervisor	1	\$ 3,979	100.00%	\$ 3,979	\$ 11,937	"	\$ 11,937
Supervisor	1	\$ 3,979	39.75%	\$ 1,582	\$ 4,746	"	\$ 4,746
Supervisor	1	\$ 4,236	33.00%	\$ 1,398	\$ 4,194	"	\$ 4,194
Supervisor	1	\$ 4,550	25.00%	\$ 1,138	\$ 3,414	"	\$ 3,414
Program Assist./CRTBA Coord.	1	\$ 3,015	50.00%	\$ 1,508	\$ 4,524	"	\$ 4,524
Program Assist./Case Manager I	1	\$ 2,918	100.00%	\$ 2,918	\$ 8,754	"	\$ 8,754
Program Assist./Case Manager I	1	\$ 2,579	100.00%	\$ 2,579	\$ 7,737	"	\$ 7,737
Program Assist./Case Manager I	1	\$ 3,511	100.00%	\$ 3,511	\$ 10,533	"	\$ 10,533
Case Manager	1	\$ 2,873	100.00%	\$ 2,873	\$ 8,619	"	\$ 8,619
Case Manager	1	\$ 2,722	80.00%	\$ 2,178	\$ 6,534	"	\$ 6,534
Case Manager	1	\$ 2,654	100.00%	\$ 2,654	\$ 7,962	"	\$ 7,962
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,732	100.00%	\$ 2,732	\$ 8,196	"	\$ 8,196
Case Manager	1	\$ 2,804	100.00%	\$ 2,804	\$ 8,412	"	\$ 8,412
Case Manager	1	\$ 2,687	100.00%	\$ 2,687	\$ 8,061	"	\$ 8,061
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,531	100.00%	\$ 2,531	\$ 7,593	"	\$ 7,593
Case Manager	1	\$ 2,581	100.00%	\$ 2,581	\$ 7,743	"	\$ 7,743
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,582	100.00%	\$ 2,582	\$ 7,746	"	\$ 7,746
Case Manager	1	\$ 2,535	100.00%	\$ 2,535	\$ 7,605	"	\$ 7,605
Case Manager	1	\$ 2,581	100.00%	\$ 2,581	\$ 7,743	"	\$ 7,743
Case Manager	1	\$ 2,824	100.00%	\$ 2,824	\$ 8,472	"	\$ 8,472
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,482	100.00%	\$ 2,482	\$ 7,446	"	\$ 7,446
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 3,235	100.00%	\$ 3,235	\$ 9,705	"	\$ 9,705
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Case Manager	1	\$ 2,410	100.00%	\$ 2,410	\$ 7,230	"	\$ 7,230
Office Supervisor	1	\$ 3,064	17.00%	\$ 521	\$ 1,563	"	\$ 1,563
Office Supervisor	1	\$ 2,978	52.50%	\$ 1,563	\$ 4,689	"	\$ 4,689
Office Supervisor	1	\$ 2,829	39.75%	\$ 1,125	\$ 3,375	"	\$ 3,375
Admin. Assistant	1	\$ 2,299	52.50%	\$ 1,207	\$ 3,621	"	\$ 3,621
Admin. Assistant	1	\$ 2,232	77.00%	\$ 1,719	\$ 5,157	"	\$ 5,157
Data Entry	1	\$ 2,575	50.00%	\$ 1,288	\$ 3,864	"	\$ 3,864
Data Entry	1	\$ 2,354	38.75%	\$ 912	\$ 2,736	"	\$ 2,736
Data Entry	1	\$ 2,318	50.00%	\$ 1,159	\$ 3,477	"	\$ 3,477
Data Entry	1	\$ 2,155	18.00%	\$ 388	\$ 1,164	"	\$ 1,164
Data Entry	1	\$ 2,255	18.00%	\$ 406	\$ 1,218	"	\$ 1,218
Data Entry	1	\$ 2,060	25.00%	\$ 515	\$ 1,545	"	\$ 1,545
Receptionist	1	\$ 1,846	17.00%	\$ 314	\$ 942	"	\$ 942
Receptionist	1	\$ 2,388	17.00%	\$ 406	\$ 1,218	"	\$ 1,218
Receptionist	1	\$ 1,724	39.75%	\$ 685	\$ 2,055	"	\$ 2,055
Total Salaries:				\$ 106,660	\$ 319,980		\$ 319,980

DIRECT SERVICE PROVIDER BUDGET

PROJECT NAME:	Cal-Learn	CONTACT PERSON:	Liz Herrera
CONTRACTOR:	EL NIDO FAMILY CENTERS	TELEPHONE NUMBER:	(818) 830-3640
CONTRACT PERIOD:	12/01/05 - 2/28/06		

DIRECT SERVICES (1)

LIST TYPES OF SERVICE:		ESTIMATED CASELOAD	COST PER CASE	TOTAL COST
1	Case Management	1120 x 3	160.91	\$ 540,658.00
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				\$ -
7				\$ -
8				\$ -
9				\$ -
10				\$ -
11				\$ -
12				\$ -
13				\$ -
14				\$ -
15				\$ -
16				\$ -
17				\$ -
18				\$ -
19				\$ -
20				\$ -
21				\$ -
Total Direct Services Cost				\$ 540,658.00

Footnote:

(1) Contractors are required to complete a budget narrative for each separate line item in their budget. All figures and compilations must be clearly explained.

EMPLOYEE BENEFITS

CONTRACTOR

EL NIDO FAMILY CENTERS

CONTRACT PERIOD:

12/01/05 - 2/28/06

Position Classification

Medical Insurance/Health Plan (1)

Employer Pays \$260.20

Employee Pays \$0.00

Total Premium \$260.20

Annual Deductible:

Employee \$

Family \$

Coverage (check all applicable):

☒ _____
☒ _____
☒ _____
☒ _____
☒ _____
☒ _____
☒ _____
☒ _____

Hospital Care : Inpatient

\$ 100 Outpatient \$ 15

X-Ray & Laboratory

Surgery

Office Visits

Pharmacy

Maternity

Mental Health/Chemical Dependency, Inpatient

Mental Health/Chemical Dependency, Outpatient

Dental Insurance

Employer Pays \$5.14

Employee Pays

Dental PMI \$9.24

Total Premium \$14.38

Dental PPO \$26.42

\$31.56

Life Insurance 2 x Annual salary @ \$.24 per \$1,000

Long Term Disability Insurance .61% per \$1,000

Employee Assistant Program 0.10%

Employer Pays 100%

Employee Pays \$

Total Premium \$

Vacation

Number of Days:

Any Increase After

12 days after 1st year, and

2nd year to 5th year of employment, increase to 17 days

after 6th year increase 1 day per year up to 22 days maximum

Sick Leave

Number of Days:

12 days per year

Any Increase or Accumulation, Number of Days or Hours

450 hrs maximum

Holidays

Number of Days:

11 days per year

Retirement

Employer Pays Average 5% base on salary

Employee Pays Optional

Total _____

Footnote:

(1) Indicate if Cafeteria Plan and amount per employee

Cal-Learn Budget Justification Narrative

CONTRACTOR:
CONTRACT PERIOD:

EL NIDO FAMILY CENTER
12/01/05 - 2/28/06

CONTACT PERSON:
TELEPHONE NUMBER:

Liz Herrera
(818) 830-3640

ADMINISTRATIVE COSTS:

DIRECT COSTS

Salaries & Benefits	<u>FTE</u>	<u>Total Cost</u>
<u>Case Management/Administrative Staff:</u>		
Case Manager Responsible for ensuring pregnant and parenting teenage clients are provided a comprehensive program of services based on a professional assessment of their needs and availability of community resources, providing home visits, as necessary, to meet clients' needs	2480%	\$191,367
Program Director Responsible for managing the day to day operations of the program at either one large site or multiple smaller sites, including the administrative and case work supervision of the program. Represents El Nido in the community and provides strong leadership to staff and program	103%	\$15,252
Program Analyst Plans and conducts quality assurance activities to assure contract compliance and quality control for the contract. Prepares reports on contract outcomes, assists in preparing Monthly Management Report and invoice. Provides training to program staff on policies and procedures of CLRN Program	70%	\$9,012
Program Assistant/Case Manager Responsible for assisting the teen parent supervisor with program-specific administrative activities.	350%	\$31,548
Supervisor Responsible for overseeing the work of a unit or group of case managers, creating a supportive, productive work environment; and for meeting agency/contract performance objectives. Primary responsibilities include the supervision and training of staff as well as quality control.	388%	\$36,177
Data Entry Clerk Operates a data processing computer, performs data entry and verification, provides computer generated reports data/report discrepancies.	200%	\$14,004
Office Supervisor Assists agency managers/supervisors or other senior level management in the performance of office duties involving complex, clerical, secretarial, and various administrative work; ensures that office runs smoothly and efficiently	109%	\$9,627
Administrative Assistant Provides a variety of administrative and skilled clerical support managers and staff in regional offices or other departments; and ensures office runs smoothly and efficiently	130%	\$8,778
Receptionist Answers phones, greets clients and performs a variety of clerical duties	74%	\$4,215

Cal-Learn Budget Justification Narrative

CONTRACTOR:	<u>EL NIDO FAMILY CENTER</u>	CONTACT PERSON:	<u>Liz Herrera</u>
CONTRACT PERIOD:	<u>12/01/05 - 2/28/06</u>	TELEPHONE NUMBER:	<u>(818) 830-3640</u>

ADMINISTRATIVE COSTS:

in support of the program

Child Care Provider

Responsible for providing nurturing, developmentally appropriate, child care for children of El Nido clients who are participating in on-site activities

Total Salaries	\$319,980
-----------------------	------------------

Fringe Benefits:

Percentage

Health Plan	5.2%	\$16,638
Retirement	6.8%	\$21,600
Social Security	7.7%	\$24,479
SUI	4.4%	\$14,030
Workers Compensation	4.1%	\$13,255
Life Insurance	0.5%	\$1,597
Long Term Disability	0.5%	\$1,688
Employee Assistant	0.1%	\$360

Total Fringe Benefits	<u>29.3%</u>	<u>\$93,647</u>
------------------------------	---------------------	------------------------

Total Personnel	\$413,627
------------------------	------------------

OPERATING COSTS (1)

Yearly Cost

Equipment:

Total Equipment	\$0
------------------------	------------

Supplies:

\$8,850

Office & Client supplies: Includes, for example, copy paper, pens, printer ink, incentives, refreshments, emergency supplies for clients, personal computers, monitors and printers.

Mileage:

\$10,200

Approximately 8,500 miles/mo x 3 mos x \$.40 /miles

Travel on Agency business (home visits, meetings & conferences)

EDP Equipment:

\$0

Printing/Postage:

\$3,750

Services and costs for mail to clients and other correspondence as well as messenger service to agency offices, DPSS, etc.

Cal-Learn Budget Justification Narrative

CONTRACTOR:	<u>EL NIDO FAMILY CENTER</u>	CONTACT PERSON:	<u>Liz Herrera</u>
CONTRACT PERIOD:	<u>12/01/05 - 2/28/06</u>	TELEPHONE NUMBER:	<u>(818) 830-3640</u>

ADMINISTRATIVE COSTS:

<u>Provider Training/Health Promo/Education:</u>	\$1,500
Technical assistance and training for staff, individually and as a group	
<u>Rent:</u>	\$30,705
Portion of facilities cost for Manchester, Carson, Antelope Valley, Inglewood and Pacoima offices	
<u>Utilities:</u>	\$4,500
Portion of utilities costs for Manchester, Carson, Inglewood, Antelope Valley and Pacoima offices	
<u>Telephones:</u>	\$9,000
Telephone, pagers, cellular phones and internet services	
<u>Facility Maintenance:</u>	\$3,923
Portion of facilities maintenance (janitorial, waste/trash/pest control) and security alarm services for Manchester, Carson, Inglewood, Antelope Valley and Pacoima	
<u>Other:</u>	\$9,900
Included office equipment maintenance, lease and rental, property & liability insurance related to program.	

Operating Costs - Subtotal	\$82,328
-----------------------------------	-----------------

INDIRECT COSTS (List all appropriate)	\$44,703
Includes all administrative overhead salaries, benefits and indirect costs needed to operate the program.	

Total Administrative Cost	<u>\$540,658</u>
----------------------------------	-------------------------

Grand Total Contract Cost	<u><u>\$540,658</u></u>
----------------------------------	--------------------------------

**AMENDMENT NUMBER FOUR TO THE AGREEMENT WITH
FOOTHILL FAMILY SERVICE FOR THE PROVISION OF
CAL-LEARN CASE MANAGEMENT SERVICES**

Reference is made to the document entitled "Cal-Learn Case Management Services Contract By and Between the County of Los Angeles and Foothill Family Service," dated August 12, 2003, and further identified as County Agreement Number 74592 Amendment Number One, dated September 29, 2003, Amendment Number Two, dated November 25, 2003, Amendment Number Three, dated November 30, 2004, Change Notice Number One, dated October 21, 2003, and Change Notice Number Two, dated May 26, 2004, hereinafter referred to as "Agreement."

Effective November 30, 2005 or one day after Board approval, whichever is later, the Agreement is amended as follows:

1. **SECTION II, TERM OF AGREEMENT**, Paragraph 1.3 is added as follows:
 - 1.3 This Agreement is extended on a month-to-month basis, not to exceed three months, commencing December 1, 2005 through February 28, 2006.
2. **SECTION IV, CONTRACT RATES**, Subparagraph 1.1.2 is added as follows:
 - 1.1.1 Attachment B-5, Contractor's Budget is added as an attachment hereto, effective December 1, 2005, on a month-to-month basis through February 28, 2006.

All other terms and conditions of the Agreement remain in full force and effect.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by the Chair, and the seal of said Board hereto affixed and attested by the Executive Officer and Clerk thereof, and CONTRACTOR has caused this Amendment to be signed by its duly authorized officer(s), this _____ day of _____ 2005.

COUNTY OF LOS ANGELES

By _____
Chair, Board of Supervisors

Attest:

VIOLET VARONA-LUKENS, Executive Officer
Clerk of the Board of Supervisors
of the County of Los Angeles

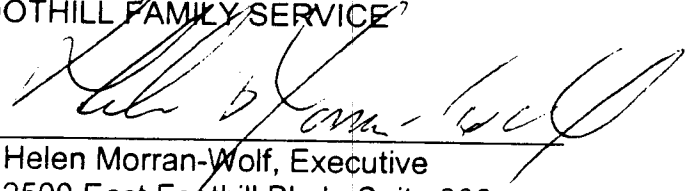
By _____
Deputy

APPROVED AS TO FORM:

RAYMOND G. FORTNER, JR.
County Counsel

By 
Senior Deputy County Counsel

FOOTHILL FAMILY SERVICE

By 
Helen Morran-Wolf, Executive
2500 East Foothill Blvd., Suite 300
Pasadena, CA 91107

ATTACHMENT B-4
CONTRACTOR'S BUDGET

CONTRACT BUDGET

PROJECT NAME: Cal-Learn

CONTRACTOR: Foothill Family Service

CONTRACT PERIOD: 12/1/05 - 2/28/06

CONTACT PERSON:

TELEPHONE NUMBER:

Jan Llewellyn

626-564-1613 x110

ADMINISTRATIVE COSTS:

DIRECT COSTS

Salaries & Benefits (See Personnel Schedule)

Total Cost

Case Management/Administrative Staff:

Salaries

\$ 92,667

Fringe Benefits

21,215

Personnel Subtotal

\$ 113,882

OPERATING COSTS (1)

Monthly Cost

Cost 12/1/05-2/28/06

Equipment *

\$ -

\$ -

Supplies

1,439

4,317

Mileage (rate per mile x estimated mileage)

408

1,224

Computers, Printer & Software (2)

-

-

Printing/Postage

220

660

Provider Training/Health Promo/Education

233

699

Rent/Depreciation/Building Interest

1,531

4,593

Utilities

204

612

Telephones

481

1,443

Facility Maintenance

723

2,169

Other (Ins.Gen., recruitment, fees/licenses) *

1,371

4,117

Operating Costs - Subtotal

\$ 6,610

\$ 19,834

INDIRECT COSTS (List all appropriate)

Indirect Cost - Subtotal

\$ -

DIRECT SERVICES COSTS:

DIRECT SERVICES

Type of Service caseload multiplied by cost per case (Sub-contracting)

\$ -

(277 clients/month x 3 mos x \$160.91)

Grand Total Contract Cost

\$ 133,716

Footnotes:

- (1) All Operating costs must be reasonable and prorated by the percentage of uses in serving CalWORKs participants if costs includes other programs cost.
- (2) DPSS prior approval is required for purchases of any Information Technology (IT) equipment. Attach EDP Equipment Schedule.
- * Please see Itemized Schedule

PERSONNEL SCHEDULE

CONTACT PERSON:
TELEPHONE NUMBER:

Jan Llewellyn
626-564-1613

EMPLOYEE BENEFITS BY CLASSIFICATION		ALL Positions	POSITION CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	POSITION CLASSIFICATION	(4)	TOTAL
Medical insurance	\$	6,122					\$	6,122
Dental insurance	\$	343					\$	343
Vision insurance	\$	197					\$	197
Short-term disability insurance	\$	79					\$	79
Cafeteria plan	\$	13					\$	13
Retirement/group life/long-term disability	\$	4,634					\$	4,634
Social security	\$	7,020					\$	7,020
Unemployment	\$	836					\$	836
Workers compensation insurance	\$	1,971					\$	1,971
Fringe Benefit Subtotal		\$	21,215	\$	-	\$	\$	21,215
Total # of Positions by Classification		\$	21,215	\$	-	\$	\$	21,215
Total Fringe Benefits (3):		\$	21,215	\$	-	\$	\$	21,215

Footnotes:

3) C. de la 1^a a la 3^a fila se multiplican en sentido horizontal por la suma de los elementos de la columna 1.

... ..

by George Bernard Shaw, published posthumously in 1914, and written in

3. The use of a variety of materials, including the use of the Internet, to provide a variety of information to the public.

Cal-Learn Budget Justification Narrative

CONTRACTOR: Foothill Family Service
 CONTRACT PERIOD: 9/01/05-11/30/05

CONTACT PERSON: Jan Llewellyn
 TELEPHONE NUMBER: 626-564-1613 x1

ADMINISTRATIVE COSTS:

DIRECT COSTS

		Annual Salary	% of time	# Mos.	FTE	Total Cost
Salaries & Benefits						
<u>Case Management/Administrative Staff:</u>						
Case Managers	Case Manager 1	\$ 29,596	39.1%	3	3	\$8,686
	Case Manager 2	28,911	37.6%	3	12	\$32,646
	Case Manager 3	30,073	39.1%	3	4	\$11,767
	Provides direct service to clients					
Coordinator:	Supervises case managers	57,358	39.1%	3	3	\$16,833
QA Specialist:	Reviews cases for compliance with required procedures	33,948	39.1%	3	1	\$3,321
TFS Specialist:	Assigns cases and provides direct service to clients	40,510	39.1%	3	1	\$3,963
Program Director:	Director of overall program	83,164	39.1%	3	1	\$8,136
TFS Data Entry Specialist:	Provides overall data entry support to program	30,525	39.1%	3	1	\$2,986
TFS Program Assistant:	Provides overall clerical support to program	30,310	28.6%	3	2	\$4,330
Total Personnel						\$92,667

Fringe Benefits:

Percentage

Health Plan	6.61%	6,122
Retirement	5.00%	4,634
Social Security	7.58%	7,020
Workers Compensation	2.13%	1,971
Other Fringe Benefits	1.58%	1,468
Total Fringe Benefits		\$21,215
Total Personnel		\$113,882

OPERATING COSTS (1)

<u>Supplies:</u> Approximately \$1,439 per month for 3 months	4,317
<u>Mileage:</u> Approximately 1,007 miles per month at \$.405 per mile for 3 months	1,224
<u>Printing/Postage:</u> Approximately \$220 per month for 3 months	660
<u>Provider Training/Health Promo/Education:</u> Approximately \$233 per month for 3 months	699
<u>Rent/Depreciation/Building Interest:</u>	

Rent: \$1.01 per square foot for 619 square feet for 3 months		4,393
Utilities: \$204 per month for 3 months		612
Telephones: \$481 per month for 3 months		1,443
Facility Maintenance: \$723 per month for 3 months		2,169
Other:	Annual	
Outside svc - audit/Cal-Learn, computer maint. & payroll	\$ 5,486	
Insurance	5,819	
Advertising	1,511	
Books and journals	526	
Other miscellaneous expense/dues & property tax	3,126	
	16,468 divided by 12 mos x 3 mos	<u>4,117</u>
Operating Costs - Subtotal		\$19,834
INDIRECT COSTS (List all appropriate)		<u>\$0</u>
Total Administrative Cost		<u>\$133,716</u>
Grand Total Contract Cost		<u><u>\$133,716</u></u>